

September 3, 2025

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

**EXECUTIVE SUMMARY**

**ALL COUNTY INFORMATION NOTICE NO. I-46-25**

This notice releases the United States Department of Agriculture, Food and Nutrition Service, Federal Fiscal Year (FFY) 2026 Cost-of-Living Adjustments (COLAs) for the period of October 1, 2025, through September 30, 2026. This notice provides the maximum allotments, deduction amounts, including the Standard Utility Allowance (SUA) and Limited Utility Allowance (LUA), maximum resource limits and income eligibility standards for FFY 2026. This notice also releases the updated *Notice to All CalFresh Recipients* (CF 11) which provides information about the FFY 2026 COLAs. This letter also provides guidance on the re-evaluation of the Thrifty Food Plan as a result of the codification of House of Representatives 1, An Act to provide for reconciliation pursuant to title II of H. Con. Res. 14. on July 4, 2025.



JENNIFER TROIA  
DIRECTOR

CALIFORNIA HEALTH & HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**  
744 P Street • Sacramento, CA 95814 • [www.cdss.ca.gov](http://www.cdss.ca.gov)



GAVIN NEWSOM  
GOVERNOR

September 3, 2025

ALL COUNTY INFORMATION NOTICE NO. I-46-25

TO: ALL COUNTY WELFARE DIRECTORS  
ALL CALFRESH PROGRAM SPECIALISTS  
ALL CONSORTIUM PROJECT MANAGERS  
ALL QUALITY CONTROL PROGRAM COORDINATORS

SUBJECT: CALFRESH COST-OF-LIVING ADJUSTMENTS EFFECTIVE  
OCTOBER 1, 2025

REFERENCE: [UNITED STATES DEPARTMENT OF AGRICULTURE, FOOD AND NUTRITION SERVICE SNAP - FISCAL YEAR 2026 COST-OF-LIVING ADJUSTMENTS](#); [HOUSE OF REPRESENTATIVES 1 \(PUBLIC LAW 119-21\)](#); [ALL COUNTY LETTER \(ACL\) NO. 25-50](#); [ACL NO. 25-50E](#); [ACL NO. 19-38](#); [ACL NO. 15-42](#); [MANUAL OF POLICY AND PROCEDURES \(MPP\) 63-504.39](#); APPROVAL OF CALIFORNIA'S SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM INDIVIDUAL UTILITY ALLOWANCES DATED AUGUST 19, 2025, EFFECTIVE OCTOBER 1, 2025

This notice informs County Welfare Departments (CWDs) that the United States Department of Agriculture, Food and Nutrition Service (FNS) has issued the Federal Fiscal Year (FFY) 2026 Cost-of-Living Adjustments (COLAs) for the period of October 1, 2025, through September 30, 2026. This notice provides the maximum allotments, deduction amounts, including the Standard Utility Allowance (SUA) and Limited Utility Allowance (LUA), maximum resource limits and income eligibility standards for FFY 2025. This notice also releases the updated *Notice to All CalFresh Recipients* (CF 11), which provides clients with information about the FFY 2026 COLAs. This letter also provides guidance on the re-evaluation of the Thrifty Food Plan as a result of the codification of House of Representatives 1, An Act to provide for reconciliation pursuant to title II of H. Con. Res. 14. (the Act) ([Public Law 119-21](#)) on July 4, 2025.

Re-evaluation of the Thrifty Food Plan

The Thrifty Food Plan (TFP) outlines the cost of a nutritious, minimal-cost diet that can be prepared at home. It serves as the basis for determining the maximum SNAP benefit

allotments based on household size. The TFP is updated periodically to reflect current dietary guidelines and food prices, ensuring benefit values are adequate to purchase a healthy, affordable diet.

The Act specifies the percentages of the TFP for household sizes. Specifically, households with nine or more members will receive an additional 22 percent per member and caps benefit amounts for households with 18 or more members. Further, the Act specifies that the next reevaluation of the TFP may occur no earlier than October 1, 2027, and any adjustment must be cost neutral. These changes limit increases in SNAP benefit allotments due to a change in dietary guidelines or the rising cost of food over time.

#### FFY 2026 Maximum Allotments

The maximum allotment by household size is listed in the following table (ATTACHMENT I):

**FFY 2026 Maximum Allotment by Household Size:**

| 1     | 2     | 3     | 4     | 5       | 6       | 7       | 8       | +Each<br>Additional<br>Person |
|-------|-------|-------|-------|---------|---------|---------|---------|-------------------------------|
| \$298 | \$546 | \$785 | \$994 | \$1,183 | \$1,421 | \$1,571 | \$1,789 | \$218                         |

#### FFY 2026 Minimum Allotment for Households of One and Two Members

The minimum benefit allotment amount increased from \$23 to \$24.

#### FFY 2026 Maximum Shelter Deduction

The maximum shelter deduction for households without an elderly or disabled member increased from \$712 to \$744. (ATTACHMENT I)

#### FFY 2026 Homeless Shelter Deduction

The homeless shelter deduction increased from \$190.30 to \$198.99. (ATTACHMENT I)

#### FFY 2026 Standard Deduction

The standard deduction by household size is listed in the table below (ATTACHMENT I):

**FFY 2026 Standard Deduction by Household Size:**

| <b>Household Size</b> | <b>Standard Deduction</b> |
|-----------------------|---------------------------|
| 1 to 3 persons        | \$209                     |
| 4 persons             | \$223                     |
| 5 persons             | \$261                     |
| 6 or more persons     | \$299                     |

FFY 2026 Standard Utility Allowance (SUA)

The SUA amount increased from \$645 to \$663 (ATTACHMENT I). A household that has heating and cooling costs separate from their rent or mortgage is eligible for the SUA.

FFY 2026 Limited Utility Allowance (LUA)

The LUA amount increased from \$166 to \$170 (ATTACHMENT I). A household that does not qualify for the SUA but incurs expenses for at least two separate utilities other than heating and cooling, is eligible for the LUA.

FFY 2026 Telephone Utility Allowance (TUA)

The TUA amount increased from \$19 to \$20 (ATTACHMENT I). A household that is not eligible for the SUA or LUA, but incurs a telephone expense, or an expense for an equivalent form of communication, is eligible for the TUA.

FFY 2026 Maximum Resource Limits

The resource limit for households remains at \$3,000. The resource limit for households where at least one person is age 60 or older or is disabled remains at \$4,500. As a reminder, the resource limit for elderly or disabled households also serves as the threshold for substantial lottery or gambling winnings.

FFY 2026 Income Eligibility Standards

Income eligibility standards are listed in ATTACHMENT I, which includes the following charts:

- Net Monthly Income Eligibility Standards
- Gross Monthly Income Eligibility Standards for Households Where Elderly/Disabled are a Separate Household, and
- Gross Monthly Income Eligibility Standards for Modified Categorical Eligibility (MCE)/Broad-Based Categorical Eligibility (BBCE).

### Tables of Benefit Issuance

To request a copy of the bracketed issuance tables that are effective October 1, 2025, please send an e-mail request to [CalFreshPolicy@dss.ca.gov](mailto:CalFreshPolicy@dss.ca.gov).

### FFY 2026 COLA Notice

The CF 11, "Notice to All CalFresh Recipients," which informs all CalFresh households of the impact of the COLA on the maximum allotment amounts and standard deduction as well as the new SUA and LUA amounts, has been updated and is included as an attachment to this letter. Prior to duplication, CWDs must ensure that the CF 11 notice contains the county-specific address that clients may use to mail state hearing requests.

To increase awareness of program reporting requirements, the income reporting threshold (IRT) levels have been included. As stated in [ACL No. 15-42](#), issued April 15, 2016, households are required to report mid-period when their income exceeds their IRT. The CalFresh IRT is the amount of gross household income that renders most households ineligible for CalFresh benefits. The IRT was set at 130 percent of the federal poverty level (FPL) per household size.

In accordance with [MPP Section 63-504.39](#), CWDs must inform all households on or before October 1, 2025, of the new CalFresh benefit amounts and deductions. The CWDs may opt to use the CF 11 or can notify households via other mass noticing practices, such as disseminating information through news or other media outlets, using social media, county websites, posters in lobbies or other locations frequented by CalFresh households. **Households must be informed of the changes no later than October 1, 2025.**

### COPIES AND TRANSLATIONS

Forms referenced in this letter are available on the [CDSS Forms/Brochures webpage](#). When CDSS completes translations of a form, they are posted on the [Translated Forms and Publications webpage](#). When made available by CDSS, forms translated into an individual's preferred language must be provided to the individual pursuant to [Manual of Policies and Procedures \(MPP\) Section 21-115.2](#). For questions on translated materials, please contact the Translation Services Section at [its@dss.ca.gov](mailto:its@dss.ca.gov). If translations are not available, recipients who have elected to receive materials in languages other than English should be sent the English version of the form or notice along with the [GEN 1365-Notice of Language Services](#) and a local contact number. See [ACL No. 22-56](#).

Per [MPP Section 21-115](#), the County Welfare Departments (CWDs) must ensure effective bilingual services are provided. This requirement may be met through utilization of paid interpreters, qualified bilingual employees, and qualified employees of

other agencies or community resources. These services must be provided, free of charge, to the applicant/recipient. If CDSS does not provide translations of a form, it is the county's responsibility to read and interpret the form if an applicant or recipient requests it. See [ACL No. 22-56](#).

Additionally, the CWDs must provide auxiliary aids and services to persons with vision, hearing, or speech disabilities, where applicable. More information regarding provisions for services to applicants and recipients who have limited English proficiency or who have disabilities can be found in [MPP Section 21-115](#) and [ACL No. 19-45](#).

If you have any questions or need additional guidance regarding the information in this letter, please contact the CalFresh Policy Bureau at [CalFreshPolicy@dss.ca.gov](mailto:CalFreshPolicy@dss.ca.gov).

Sincerely,

***Original Document Signed By***

BECKY SILVA, Chief  
CalFresh Branch  
Family Engagement and Empowerment Division

Attachments

**CALFRESH PROGRAM  
OCTOBER 1, 2025 – SEPTEMBER 30, 2026  
California Monthly Income Eligibility Standards  
Allotments and Deductions**

**Net Monthly Income Eligibility Standards (100% of Poverty Level)**

| Household Size         | Net Income |
|------------------------|------------|
| 1                      | \$1,305    |
| 2                      | 1,763      |
| 3                      | 2,221      |
| 4                      | 2,680      |
| 5                      | 3,138      |
| 6                      | 3,596      |
| 7                      | 4,055      |
| 8                      | 4,513      |
| Each Additional Member | +459       |

**Gross Monthly Income Eligibility Standards for Households Where Elderly/Disabled Are a Separate Household (165% of Poverty Level)**

| Household Size         | Gross Income |
|------------------------|--------------|
| 1                      | \$2,152      |
| 2                      | 2,909        |
| 3                      | 3,665        |
| 4                      | 4,421        |
| 5                      | 5,177        |
| 6                      | 5,934        |
| 7                      | 6,690        |
| 8                      | 7,446        |
| Each Additional Member | +757         |

**Maximum CalFresh Allotments**

| Household Size         | Allotment |
|------------------------|-----------|
| 1                      | \$298     |
| 2                      | 546       |
| 3                      | 785       |
| 4                      | 994       |
| 5                      | 1,183     |
| 6                      | 1,421     |
| 7                      | 1,571     |
| 8                      | 1,789     |
| Each Additional Member | +218      |

**Gross Monthly Income Eligibility Standards for Semi-Annual Reporting (SAR) (130% of Poverty Level)**

| Household Size         | Gross Income |
|------------------------|--------------|
| 1                      | \$1,696      |
| 2                      | 2,292        |
| 3                      | 2,888        |
| 4                      | 3,483        |
| 5                      | 4,079        |
| 6                      | 4,675        |
| 7                      | 5,271        |
| 8                      | 5,867        |
| Each Additional Member | +596         |

**Gross Monthly Income Eligibility Standards for Modified Categorical Eligibility (MCE)/Broad-Based Categorical Eligibility (BBCE) (200% of Poverty Level)**

| Household Size         | Gross Income |
|------------------------|--------------|
| 1                      | \$2,610      |
| 2                      | 3,526        |
| 3                      | 4,442        |
| 4                      | 5,360        |
| 5                      | 6,276        |
| 6                      | 7,192        |
| 7                      | 8,110        |
| 8                      | 9,026        |
| Each Additional Member | +918         |

**Deduction**

|                                      |   |
|--------------------------------------|---|
| Standard Deduction                   | \$209 (HH size 1-3)<br>\$223 (HH size 4)<br>\$261 (HH size 5)<br>\$299 (HH size 6+) |
| Maximum Shelter Deduction            | \$744   |
| SUA                                  | \$663   |
| LUA                                  | \$170   |
| TUA                                  | \$20  |
| Homeless Household Shelter Allowance | \$198.99  |

## NOTICE TO ALL CALFRESH RECIPIENTS

### IMPORTANT — PLEASE READ

Effective October 1, 2026, State and Federal laws provide for the following:

**Maximum CalFresh Allotments:** These are the benefit amounts your household will receive based on your household size if your household has no income.

**Income Reporting Threshold (IRT):** You must report any time your household's total monthly income is more than your current IRT. The report must be made within 10 days after the change in income is known.

The max allotments and IRTs are:

|     | HH<br>SIZE<br>1 | HH<br>SIZE<br>2 | HH<br>SIZE<br>3 | HH<br>SIZE<br>4 | HH<br>SIZE<br>5 | HH<br>SIZE<br>6 | HH<br>SIZE<br>7 | HH<br>SIZE<br>8 | Household Size Each<br>Additional Person |
|-----|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|--|
| Max | \$298           | \$546           | \$785           | \$994           | \$1,183         | \$1,421         | \$1,571         | \$1,789         | +\$218                                   |
| IRT | \$1,696         | \$2,292         | \$2,888         | \$3,483         | \$4,079         | \$4,675         | \$5,271         | \$5,867         | +\$596                                   |

- The maximum excess shelter deduction will increase from \$712.00 to \$744.00.
- The homeless shelter allowance will increase from \$190.30 to \$198.99.
- The Standard Utility Allowance (SUA) of \$645.00 will increase to \$663.00.
- The Limited Utility Allowance (LUA) of \$166.00 will increase to \$170.00.
- The Telephone Utility Allowance (TUA) of \$19.00 will increase to \$20.00.

If the SUA or the LUA was used as part of your shelter deduction before October 1, and if you have had no changes in your CalFresh case, your CalFresh benefits may change after October 1.

The amount of the change depends on your household. You will be told about any change in your benefits in a separate notice.

#### Resource Limits:

Please note that the elderly/disabled household resource limit also serves as the threshold for substantial lottery or gambling winnings.

| HOUSEHOLD<br>RESOURCE LIMIT | ELDERLY/DISABLED<br>HOUSEHOLD RESOURCE<br>LIMIT |
|-----------------------------|---|
| \$3,000                     | \$4,500   |

#### Standard Deductions for FFY 2026:

These are the standard deduction amounts your household will receive based on your household size.

| HOUSEHOLD SIZE    | STANDARD DEDUCTIONS |
|-------------------|---------------------|
| 1 to 3 persons    | \$209               |
| 4 persons         | \$223               |
| 5 persons         | \$261               |
| 6 or more persons | \$299               |

If you think we made a mistake calculating your October CalFresh benefits due to the new allotment amounts or the SUA/LUA, you may ask for a state hearing **within 90 days of when you got this letter** by writing to:

or you may call toll free: 1-800-952-5253. If you are deaf and use TDD, call 1-800-952-8349. When you ask for a state hearing, you must tell us why you think we made a mistake. You can speak for yourself at the hearing or you can have a friend, attorney, or other person speak for you. If you need someone to speak for you, you must get someone to help you. You may ask for free legal aid at a legal aid office in your area.